## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Commissioner for Patents Commissioner for Patents P.O. Box 1450 Alexandra, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate, All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as included unless corrected below or directed otherwise in Block 1, by 0, specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

| indicated unless corrected<br>maintenance fee notificatio   | below or directed otherwise<br>ns.  | in Block 1, by (a)   | specifying  | a new correspondence addres  |  |  |
|---|---|--|---|--|--|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  |   |  |   | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.   |  |  |
| 00758 7   | 590 02/13/2006  |  |   | have its own certifica   | te of mailing or transmission.                                       |  |
| FENWICK & WEST LLP<br>SILICON VALLEY CENTER<br>801 CALIFORNIA STREET  |   |  |   | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmirtal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being fasciniti transmitted to the USPTO (571) 273-2885, on the date indicated below. |  |  |
| MOUNTAIN VIE  | W, CA 94041   |  |   |  |  | (Depositor's name  |
|   |   |  |   |  |  | (Signature)  |
|   |   |  |   |  |  | (Date  |
| APPLICATION NO.   | FILING DATE   | F  | FIRST NAMED INVENTOR  |  | ATTORNEY DOCKET NO.  | CONFIRMATION NO.   |
| 10/806,730  | 03/22/2004  |  | Yi-Lu:  | ng Kuo   | 23724-07787  | 2535   |
| TITLE OF INVENTION: I   | NTERFACE CARD FIXTUR  | E FOR A COMPU  | TER SYSTI   | EM   |  |  |
| APPLN, TYPE   | SMALL ENTITY  | ISSUE FEE  |   | PUBLICATION FEE  | TOTAL FEE(S) DUE   | DATE DUE   |
| nonprovisional  | МО  | \$1460   | 700   | \$300  | \$1760 1,000   | 05/15/2006   |
| EXAMINER  |   | ART UNI  | Г   | CLASS-SUBCLASS   |  | •  |
| LEVI, DAMEON E  |   | 2841   |   | 361-801000   |  |  |
| 1. Canage of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address (or Change of Correspondence Address form PTO SBI 22) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO SBI 47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |   |  | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |  |  |  |
| 3. ASSIGNEE NAME AND  | RESIDENCE DATA TO B   | E PRINTED ON T   | HE PATEN  | T (print or type)  |  |  |
| PLEASE NOTE: Unles<br>recordation as set forth i  | s an assignee is identified be<br>n 37 CFR 3.11. Completion of                                  | low, no assignee d<br>of this form is NOT                          | ata will app<br>a substitute  | pear on the patent. If an assign for filing an assignment.   | mee is identified below, the   | document has been filed fo                               |
| (A) NAME OF ASSIGNEE  |   |  | (B) RESIDENCE: (CITY and STATE OR COUNTRY)  |  |  |  |
| Shuttle Inc.  |   |  | TAIV  | JAN  |  |  |
| Please check the appropriat   | e assignee category or catego   | ries (will not be prin   | ated on the p   | oatent): 🗖 Individual 🖾 (  | Corporation or other private gr                                      | oup entity 🔲 Governmen                                   |
| 4a. The following fee(s) are  | enclosed:   | 4b.  | b. Payment of Fee(s):   |  |  |  |
| X Issue Fee   |   |  | A check in the amount of the fee(s) is enclosed.  |  |  |  |
| XI Publication Fee (No small entity discount permitted)  ☐ Advance Order - # of Copies  |   |  | ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 10_2555 (enclose an extra copy of this form).  |  |  |  |
| 5. Change in Entity Status  | (from status indicated above  | )  | Deposit 2   | Account Number 19-2555   | (enclose an ext  | ra copy of this form).                                   |
| a. Applicant claims S   | MALL ENTITY status. See   | 37 CFR 1.27.   |   | cant is no longer claiming SM/   |  |  |
| The Director of the USPTO<br>NOTE: The Issue Fee and I<br>interest as shown by the rec  | is requested to apply the Issu<br>Publication Fee (if required) words of the United States Pate | e Fee and Publicati<br>vill not be accepted<br>int and Trademark ( | on Fee (if ar<br>from anyon<br>Office.  | ny) or to re-apply any previous<br>e other than the applicant; a re-   | sly paid issue fee to the applic<br>gistered attorney or agent; or t | ation identified above.<br>he assignee or other party is |
| Authorized Signature /Robert A. Hulse/  |   |  | Date April 12, 2006   |  |  |  |
| Typed or printed name Robert A. Hulse   |   |  |   | Registration   | No. 48,473   |  |
| Alexandria, Virginia 22313  | -1450.  |  |   | to obtain or retain a benefit by<br>llection is estimated to take 12<br>pon the individual case. Any c<br>mation Officer, U.S. Patent and<br>D FORMS TO THIS ADDRES<br>lection of information unless it  |  |  |
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